

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ASK		
O.I.P.E. CLASSIFIER		43	4/11/01
FORMALITY REVIEW	MD	579	5/30/01
RESPONSE FORMALITY REVIEW	A.T	1021	11/13/01

# INDEX OF CLAIMS

Best Available Copy

✓ ..... Searched  
 = ..... Indexed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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030  
11/13/01